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Variation in practice patterns for the management of newborn spina bifida in the United States

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Abstract

Objective: To survey variations in recommended initial management of newborn spina bifida (SB).

Methods: Members of an international pediatric urology listserve and Pediatric Urology Nurse Specialists Organization were surveyed on practice patterns for newborn SB. Pediatric urologists (PU), nurse practitioners (NP) and physician assistants (PA) practicing in the United States were included.

Results: 63 practitioners (48% PU and 52% NP/PA) were included. Most practice at tertiary hospitals (94%) and about half utilize a protocol (56%). Recommended in-hospital screening tests include renal ultrasound (95%), voiding cystourethrogram (52%), catheterized bladder volumes (56%) and renal function tests (37%). Urodynamics are deferred until follow-up by 71%. Fifty percent initiate clean

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